BEFORE THE MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:)	
Amanzoopinder Kaur Samrao, M.D.)	Case No. 800-2016-023232
Physician's and Surgeon's)	
Certificate No. A 109227)	
Respondent)	

DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on October 25, 2019.

IT IS SO ORDERED: September 27, 2019.

MEDICAL BOARD OF CALIFORNIA

Kristina D. Lawson, J.D., Chair

Panel B

1	Xavier Becerra			
2	Attorney General of California STEVEN D. MUNI			
3	Supervising Deputy Attorney General JANNSEN TAN	•		
4	Deputy Attorney General State Bar No. 237826			
5	1300 I Street, Suite 125 P.O. Box 944255			
6	Sacramento, CA 94244-2550 Telephone: (916) 210-7549 Facsimile: (916) 327-2247			
7	Attorneys for Complainant	•		
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9	BEFORE THE MEDICAL BOARD OF CALIFORNIA			
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA			
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12	•	Case No. 800-2016-023232		
13	In the Matter of the Accusation Against:	Case No. 600-2010-025252		
14	AMANZOOPINDER KAUR SAMRAO, M.D.	STIPULATED SETTLEMENT AND		
15	The Permanente Medical Group 7373 West Lane	DISCIPLINARY ORDER		
16	Stockton, CA 95210-3377			
17	Physician's and Surgeon's Certificate No. A 109227			
18	Respondent.			
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21	IT IS HEDERY STIDIII ATED AND ACD	RED by and between the parties to the above-		
22	IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-			
23	entitled proceedings that the following matters are			
24	<u>PARTIES</u>			
25	1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board			
26	of California (Board). She brought this action solely in her official capacity and is represented in			
27	this matter by Xavier Becerra, Attorney General of the State of California, by Jannsen Tan,			
28	Deputy Attorney General.			
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- Respondent Amanzoopinder Kaur Samrao, M.D. (Respondent) is represented in this
 proceeding by attorney M. Bradley Wishek, whose address is: 765 University Avenue
 Sacramento, CA 95825
- 3. On or about August 14, 2009, the Board issued Physician's and Surgeon's Certificate No. A 109227 to Amanzoopinder Kaur Samrao, M.D. (Respondent). The Physician's and Surgeon's Certificate will expire on April 30, 2021, unless it has been renewed.

JURISDICTION

- 4. Accusation No. 800-2016-023232 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent. Respondent timely filed her Notice of Defense contesting the Accusation.
- 5. A copy of Accusation No. 800-2016-023232 is attached as exhibit A and incorporated herein by reference.
- 6. Respondent is currently charged in the Superior Court of California, County of Alameda, with violations of Vehicle Code section 23152, subdivisions (a) and (b), in Complaint No. 19-CR-000742, arising out of the events which occurred on June 7, 2018. This stipulated settlement encompasses all disciplinary action to be taken by the Board in connection with the factual matters alleged in the Accusation, including the events on June 7, 2018. Should Respondent be convicted of a crime in the above-referenced proceeding, such conviction(s) shall not constitute a new or separate basis for the filing of an Accusation, imposition of discipline, or any violation of this disciplinary order.

ADVISEMENT AND WAIVERS

- 7. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2016-023232. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.
- 8. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine

the witnesses against her; the right to present evidence and to testify on her own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

9. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

- 10. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2016-023232, if proven at a hearing, constitute cause for imposing discipline upon her Physician's and Surgeon's Certificate.
- 11. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation, and that Respondent hereby gives up her right to contest those charges.
- 12. Respondent agrees that if she ever petitions for early termination or modification of probation, or if an accusation and/or petition to revoke probation is filed against her, before the Medical Board of California, all of the charges and allegations contained in Accusation No. 800-2016-023232 shall be deemed true, correct and fully admitted by Respondent for purposes of that proceeding or any other licensing proceeding involving Respondent in the State of California.
- 13. Respondent agrees the Disciplinary Order below, requiring the disclosure of probation pursuant to Business and Professions Code section 2228.1, serves to protect the public interest.
- 14. Respondent agrees that her Physician's and Surgeon's Certificate is subject to discipline and she agrees to be bound by the Board's probationary terms as set forth in the Disciplinary Order below.

RESERVATION

15. The admissions made by Respondent herein are only for the purposes of this proceeding, or any other proceedings in which the Medical Board of California or other

professional licensing agency is involved, and shall not be admissible in any other criminal or civil proceeding.

CONTINGENCY

- Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or her counsel. By signing the stipulation, Respondent understands and agrees that she may not withdraw her agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.
- 17. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.
- 18. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A 109227 issued to Respondent Amanzoopinder Kaur Samrao, M.D. is revoked. However, the revocation is stayed and Respondent is placed on probation for four (4) years on the following terms and conditions.

- 1. <u>ALCOHOL ABSTAIN FROM USE</u>. Respondent shall abstain completely from the use of products or beverages containing alcohol.
- 2. <u>BIOLOGICAL FLUID TESTING</u>. Respondent shall immediately submit to biological fluid testing, at Respondent's expense, upon request of the Board or its designee.

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"Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Prior to practicing medicine, Respondent shall contract with a laboratory or service approved in advance by the Board or its designee that will conduct random, unannounced, observed, biological fluid testing. The contract shall require results of the tests to be transmitted by the laboratory or service directly to the Board or its designee within four hours of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If Respondent fails to cooperate in a random biological fluid testing program within the specified time frame, Respondent shall receive a notification from the Board or its designee to immediately cease the practice of medicine. The Respondent shall not resume the practice of medicine until the final decision on an accusation and/or a petition to revoke probation is effective. An accusation and/or petition to revoke probation shall be filed by the Board within 30 days of the notification to cease practice. If the Respondent requests a hearing on the accusation and/or petition to revoke probation, the Board shall provide the Respondent with a hearing within 30 days of the request, unless the Respondent stipulates to a later hearing. If the case is heard by an Administrative Law Judge alone, he or she shall forward a Proposed Decision to the Board within 15 days of submission of the matter. Within 15 days of receipt by the Board of the Administrative Law Judge's proposed decision, the Board shall issue its Decision, unless good cause can be shown for the delay. If the case is heard by the Board, the Board shall issue its decision within 15 days of submission of the case, unless good cause can be shown for the delay. Good cause includes, but is not limited to, non-adoption of the proposed decision, requests for reconsideration, remands and other interlocutory orders issued by the Board. The cessation of practice shall not apply to the reduction of the probationary time period.

If the Board does not file an accusation or petition to revoke probation within 15 days of the issuance of the notification to cease practice or does not provide Respondent with a hearing within 30 days of such a request, the notification of cease practice shall be dissolved.

 3. <u>CLINICAL DIAGNOSTIC EVALUATIONS AND REPORTS</u>: Within thirty (30) calendar days of the effective date of this Decision, and on whatever periodic basis thereafter as may be required by the Board or its designee, Respondent shall undergo and complete a clinical diagnostic evaluation, including any and all testing deemed necessary, by a Board-appointed board certified physician and surgeon. The examiner shall consider any information provided by the Board or its designee and any other information he or she deems relevant, and shall furnish a written evaluation report to the Board or its designee.

The clinical diagnostic evaluation shall be conducted by a licensed physician and surgeon who holds a valid, unrestricted license, has three (3) years' experience in providing evaluations of physicians and surgeons with substance abuse disorders, and is approved by the Board or its designee. The clinical diagnostic evaluation shall be conducted in accordance with acceptable professional standards for conducting substance abuse clinical diagnostic evaluations. The evaluator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and independent evaluation. The clinical diagnostic evaluation report shall set forth, in the evaluator's opinion, whether Respondent has a substance abuse problem, whether Respondent is a threat to himself or herself or others, and recommendations for substance abuse treatment, practice restrictions, or other recommendations related to Respondent's rehabilitation and ability to practice safely. If the evaluator determines during the evaluation process that Respondent is a threat to himself or herself or others, the evaluator shall notify the Board within twenty-four (24) hours of such a determination.

In formulating his or her opinion as to whether Respondent is safe to return to either parttime or full-time practice and what restrictions or recommendations should be imposed, including
participation in an inpatient or outpatient treatment program, the evaluator shall consider the
following factors: Respondent's license type; Respondent's history; Respondent's documented
length of sobriety (i.e., length of time that has elapsed since Respondent's last substance use);
Respondent's scope and pattern of substance abuse; Respondent's treatment history, medical
history and current medical condition; the nature, duration and severity of Respondent's

substance abuse problem or problems; and whether Respondent is a threat to himself or herself or the public.

For all clinical diagnostic evaluations, a final written report shall be provided to the Board no later than ten (10) days from the date the evaluator is assigned the matter. If the evaluator requests additional information or time to complete the evaluation and report, an extension may be granted, but shall not exceed thirty (30) days from the date the evaluator was originally assigned the matter.

The Board shall review the clinical diagnostic evaluation report within five (5) business days of receipt to determine whether Respondent is safe to return to either part-time or full-time practice and what restrictions or recommendations shall be imposed on Respondent based on the recommendations made by the evaluator. Respondent shall not be returned to practice until he or she has at least thirty (30) days of negative biological fluid tests or biological fluid tests indicating that he or she has not used, consumed, ingested, or administered to himself or herself a prohibited substance, as defined in section 1361.51, subdivision (e), of Title 16 of the California Code of Regulations.

Clinical diagnostic evaluations conducted prior to the date this Decision is adopted shall not be accepted towards the fulfillment of this requirement. Upon adoption of the decision and prior to its effective date, Respondent may coordinate with the Board for a clinical diagnostic evaluation. The cost of the clinical diagnostic evaluation, including any and all testing deemed necessary by the examiner, the Board or its designee, shall be borne by the licensee.

Respondent shall not engage in the practice of medicine until notified by the Board or its designee that he or she is fit to practice medicine safely. The period of time that Respondent is not practicing medicine shall not be counted toward completion of the term of probation. Respondent shall undergo biological fluid testing as required in this Decision at least two (2) times per week while awaiting the notification from the Board if he or she is fit to practice medicine safely.

Respondent shall comply with all restrictions or conditions recommended by the examiner conducting the clinical diagnostic evaluation within fifteen (15) calendar days after being notified

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by the Board or its designee.

NOTICE OF EMPLOYER OR SUPERVISOR INFORMATION. Within seven (7) days of the effective date of this Decision, Respondent shall provide to the Board the names, physical addresses, mailing addresses, and telephone numbers of any and all employers and supervisors. Respondent shall also provide specific, written consent for the Board, Respondent's worksite monitor, and Respondent's employers and supervisors to communicate regarding Respondent's work status, performance, and monitoring.

For purposes of this section, "supervisors" shall include the Chief of Staff and Health or Well Being Committee Chair, or equivalent, if applicable, when the Respondent has medical staff privileges.

BIOLOGICAL FLUID TESTING. Respondent shall immediately submit to 5. biological fluid testing, at Respondent's expense, upon request of the Board or its designee. "Biological fluid testing" may include, but is not limited to, urine, blood, breathalyzer, hair follicle testing, or similar drug screening approved by the Board or its designee. Respondent shall make daily contact with the Board or its designee to determine whether biological fluid testing is required. Respondent shall be tested on the date of the notification as directed by the Board or its designee. The Board may order a Respondent to undergo a biological fluid test on any day, at any time, including weekends and holidays. Except when testing on a specific date as ordered by the Board or its designee, the scheduling of biological fluid testing shall be done on a random basis. The cost of biological fluid testing shall be borne by the Respondent.

During the first year of probation, Respondent shall be subject to 52 to 104 random tests. During the second year of probation and for the duration of the probationary term, up to five (5) years, Respondent shall be subject to 36 to 104 random tests per year. Only if there has been no positive biological fluid tests in the previous five (5) consecutive years of probation, may testing be reduced to one (1) time per month. Nothing precludes the Board from increasing the number of random tests to the first-year level of frequency for any reason.

Prior to practicing medicine, Respondent shall contract with a laboratory or service, approved in advance by the Board or its designee, that will conduct random, unannounced,

observed, biological fluid testing. Respondent may coordinate with the Board to obtain advanced
approval of the laboratory or service after the decision is adopted and prior to its effective date.
The laboratory or service shall meet all of the following standards:

- (a) Its specimen collectors are either certified by the Drug and Alcohol Testing Industry Association or have completed the training required to serve as a collector for the United States Department of Transportation.
- (b) Its specimen collectors conform to the current United States Department of Transportation Specimen Collection Guidelines.
- (c) Its testing locations comply with the Urine Specimen Collection Guidelines published by the United States Department of Transportation without regard to the type of test administered.
- (d) Its specimen collectors observe the collection of testing specimens.
- (e) Its laboratories are certified and accredited by the United States Department of Health and Human Services.
- (f) Its testing locations shall submit a specimen to a laboratory within one (1) business day of receipt and all specimens collected shall be handled pursuant to chain of custody procedures. The laboratory shall process and analyze the specimens and provide legally defensible test results to the Board within seven (7) business days of receipt of the specimen. The Board will be notified of non-negative results within one (1) business day and will be notified of negative test results within seven (7) business days.
- (g) Its testing locations possess all the materials, equipment, and technical expertise necessary in order to test Respondent on any day of the week.
- (h) Its testing locations are able to scientifically test for urine, blood, and hair specimens for the detection of alcohol and illegal and controlled substances.
- (i) It maintains testing sites located throughout California.
- (j) It maintains an automated 24-hour toll-free telephone system and/or a secure on-line computer database that allows the Respondent to check in daily for testing.
- (k) It maintains a secure, HIPAA-compliant website or computer system that allows staff

access to drug test results and compliance reporting information that is available 24 hours a day.

- (1) It employs or contracts with toxicologists that are licensed physicians and have knowledge of substance abuse disorders and the appropriate medical training to interpret and evaluate laboratory biological fluid test results, medical histories, and any other information relevant to biomedical information.
- (m) It will not consider a toxicology screen to be negative if a positive result is obtained while practicing, even if the Respondent holds a valid prescription for the substance.

Prior to changing testing locations for any reason, including during vacation or other travel, alternative testing locations must be approved by the Board and meet the requirements above.

The contract shall require that the laboratory directly notify the Board or its designee of non-negative results within one (1) business day and negative test results within seven (7) business days of the results becoming available. Respondent shall maintain this laboratory or service contract during the period of probation.

A certified copy of any laboratory test result may be received in evidence in any proceedings between the Board and Respondent.

If a biological fluid test result indicates Respondent has used, consumed, ingested, or administered to himself or herself a prohibited substance, the Board shall order Respondent to cease practice and instruct Respondent to leave any place of work where Respondent is practicing medicine or providing medical services. The Board shall immediately notify all of Respondent's employers, supervisors and work monitors, if any, that Respondent may not practice medicine or provide medical services while the cease-practice order is in effect.

A biological fluid test will not be considered negative if a positive result is obtained while practicing, even if the practitioner holds a valid prescription for the substance. If no prohibited substance use exists, the Board shall lift the cease-practice order within one (1) business day.

After the issuance of a cease-practice order, the Board shall determine whether the positive biological fluid test is in fact evidence of prohibited substance use by consulting with the specimen collector and the laboratory, communicating with the licensee, his or her treating

physician(s), other health care provider, or group facilitator, as applicable.

For purposes of this condition, the terms "biological fluid testing" and "testing" mean the acquisition and chemical analysis of a Respondent's urine, blood, breath, or hair.

For purposes of this condition, the term "prohibited substance" means an illegal drug, a lawful drug not prescribed or ordered by an appropriately licensed health care provider for use by Respondent and approved by the Board, alcohol, or any other substance the Respondent has been instructed by the Board not to use, consume, ingest, or administer to himself or herself.

If the Board confirms that a positive biological fluid test is evidence of use of a prohibited substance, Respondent has committed a major violation, as defined in section 1361.52(a), and the Board shall impose any or all of the consequences set forth in section 1361.52(b), in addition to any other terms or conditions the Board determines are necessary for public protection or to enhance Respondent's rehabilitation.

Notwithstanding the provisions above, Respondent's period of documented business-related travel outside the United States will relieve the Respondent of the responsibility to comply with the requirement of biological fluid testing. Respondent shall notify the Board or its designee in writing at least fifteen calendar days prior to any anticipated business-related travel outside the United States. This written notification shall include documentation verifying the business purpose and the length of the international travel.

Respondent's total time period of relief from biological fluid testing during businessrelated travel outside the United States shall not exceed thirty days per year.

Within five days of Respondent's return to the United States following business-related travel outside the United States, Respondent shall submit to a blood test screening for Phosphatidyl Ethanol. Respondent shall not practice medicine after a business trip until she gets tested. This test shall be subject to all the requirements of biological fluid testing set forth above.

6. <u>SUBSTANCE ABUSE SUPPORT GROUP MEETINGS</u>. Within thirty (30) days of the effective date of this Decision, Respondent shall submit to the Board or its designee, for its prior approval, the name of a substance abuse support group which he or she shall attend for the duration of probation. Respondent shall attend substance abuse support group meetings at least

once per week, or as ordered by the Board or its designee. Respondent shall pay all substance abuse support group meeting costs.

The facilitator of the substance abuse support group meeting shall have a minimum of three (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state or nationally certified organizations. The facilitator shall not have a current or former financial, personal, or business relationship with Respondent within the last five (5) years. Respondent's previous participation in a substance abuse group support meeting led by the same facilitator does not constitute a prohibited current or former financial, personal, or business relationship.

The facilitator shall provide a signed document to the Board or its designee showing Respondent's name, the group name, the date and location of the meeting, Respondent's attendance, and Respondent's level of participation and progress. The facilitator shall report any unexcused absence by Respondent from any substance abuse support group meeting to the Board, or its designee, within twenty-four (24) hours of the unexcused absence.

Notwithstanding the provisions above, Respondent's periods of documented business-related travel outside the United States will relieve Respondent of the responsibility to comply with the requirement of substance abuse support group meetings. Respondent shall notify the Board or its designee in writing at least fifteen calendar days prior to any anticipated business-related travel outside the United States. This written notification shall include documentation verifying the business purpose and the length of international travel.

Respondent's total time period of relief from substance abuse support group meetings during business-related travel outside the United States shall not exceed thirty days per year.

7. WORKSITE MONITOR FOR SUBSTANCE-ABUSING LICENSEE. Within thirty (30) calendar days of the effective date of this Decision, Respondent shall submit to the Board or its designee for prior approval as a worksite monitor, the name and qualifications of one or more licensed physician and surgeon, other licensed health care professional if no physician and surgeon is available, or, as approved by the Board or its designee, a person in a position of authority who is capable of monitoring the Respondent at work.

The worksite monitor shall not have a current or former financial, personal, or familial relationship with Respondent, or any other relationship that could reasonably be expected to compromise the ability of the monitor to render impartial and unbiased reports to the Board or its designee. If it is impractical for anyone but Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board or its designee, however, under no circumstances shall Respondent's worksite monitor be an employee or supervisee of the licensee.

The worksite monitor shall have an active unrestricted license with no disciplinary action within the last five (5) years, and shall sign an affirmation that he or she has reviewed the terms and conditions of Respondent's disciplinary order and agrees to monitor Respondent as set forth by the Board or its designee.

Respondent shall pay all worksite monitoring costs.

The worksite monitor shall have face-to-face contact with Respondent in the work environment on as frequent a basis as determined by the Board or its designee, but not less than once per week; interview other staff in the office regarding Respondent's behavior, if requested by the Board or its designee; and review Respondent's work attendance.

The worksite monitor shall verbally report any suspected substance abuse to the Board and Respondent's employer or supervisor within one (1) business day of occurrence. If the suspected substance abuse does not occur during the Board's normal business hours, the verbal report shall be made to the Board or its designee within one (1) hour of the next business day. A written report that includes the date, time, and location of the suspected abuse; Respondent's actions; and any other information deemed important by the worksite monitor shall be submitted to the Board or its designee within 48 hours of the occurrence.

The worksite monitor shall complete and submit a written report monthly or as directed by the Board or its designee which shall include the following: (1) Respondent's name and Physician's and Surgeon's Certificate number; (2) the worksite monitor's name and signature; (3) the worksite monitor's license number, if applicable; (4) the location or location(s) of the worksite; (5) the dates Respondent had face-to-face contact with the worksite monitor; (6) the names of worksite staff interviewed, if applicable; (7) a report of Respondent's work attendance;

(8) any change in Respondent's behavior and/or personal habits; and (9) any indicators that can lead to suspected substance abuse by Respondent. Respondent shall complete any required consent forms and execute agreements with the approved worksite monitor and the Board, or its designee, authorizing the Board, or its designee, and worksite monitor to exchange information.

If the worksite monitor resigns or is no longer available, Respondent shall, within five (5) calendar days of such resignation or unavailability, submit to the Board or its designee, for prior approval, the name and qualifications of a replacement monitor who will be assuming that responsibility within fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall receive a notification from the Board or its designee to cease the practice of medicine within three (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a replacement monitor is approved and assumes monitoring responsibility.

- 8. <u>VIOLATION OF PROBATION CONDITION FOR SUBSTANCE ABUSING</u>

 <u>LICENSEES</u>. Failure to fully comply with any term or condition of probation is a violation of probation.
- A. If Respondent commits a major violation of probation as defined by section 1361.52, subdivision (a), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
- (1) Issue an immediate cease-practice order and order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense. The cease-practice order issued by the Board or its designee shall state that Respondent must test negative for at least a month of continuous biological fluid testing before being allowed to resume practice. For purposes of determining the length of time a Respondent must test negative while undergoing continuous biological fluid testing following issuance of a cease-practice order, a month is defined as thirty calendar (30) days. Respondent may not resume the practice of medicine until notified in writing by the Board or its designee that he or she may do so.

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- (2) Increase the frequency of biological fluid testing.
- (3) Refer Respondent for further disciplinary action, such as suspension, revocation, or other action as determined by the Board or its designee.
- B. If Respondent commits a minor violation of probation as defined by section 1361.52, subdivision (c), of Title 16 of the California Code of Regulations, the Board shall take one or more of the following actions:
 - (1) Issue a cease-practice order;
 - (2) Order practice limitations;
 - (3) Order or increase supervision of Respondent;
 - (4) Order increased documentation;
 - (5) Issue a citation and fine, or a warning letter;
- (6) Order Respondent to undergo a clinical diagnostic evaluation to be conducted in accordance with section 1361.5, subdivision (c)(1), of Title 16 of the California Code of Regulations, at Respondent's expense;.
 - (7) Take any other action as determined by the Board or its designee.
- C. Nothing in this Decision shall be considered a limitation on the Board's authority to revoke Respondent's probation if he or she has violated any term or condition of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 9. <u>NOTIFICATION</u>. Within seven (7) days of the effective date of this Decision, the Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the Chief Executive Officer at every hospital where privileges or membership are extended to Respondent, at any other facility where Respondent engages in the practice of medicine, including all physician and locum tenens registries or other similar agencies, and to the Chief Executive Officer at every insurance carrier which extends malpractice insurance coverage to

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Respondent. Respondent shall submit proof of compliance to the Board or its designee within 15 calendar days.

This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

10. PATIENT DISCLOSURE.

Before a patient's first visit following the effective date of this order and while the respondent is on probation, the respondent must provide all patients, or patient's guardian or health care surrogate, with a separate disclosure that includes the respondent's probation status, the length of the probation, the probation end date, all practice restrictions placed on the respondent by the board, the board's telephone number, and an explanation of how the patient can find further information on the respondent's probation on the respondent's profile page on the board's website. Respondent shall obtain from the patient, or the patient's guardian or health care surrogate, a separate, signed copy of that disclosure. Respondent shall not be required to provide a disclosure if any of the following applies: (1) The patient is unconscious or otherwise unable to comprehend the disclosure and sign the copy of the disclosure and a guardian or health care surrogate is unavailable to comprehend the disclosure and sign the copy; (2) The visit occurs in an emergency room or an urgent care facility or the visit is unscheduled, including consultations in inpatient facilities; (3) Respondent is not known to the patient until immediately prior to the start of the visit; (4) Respondent does not have a direct treatment relationship with the patient.

- 11. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE NURSES. During probation, Respondent is not prohibited from supervising physician assistants and advanced practice nurses during any period in which she is employed by The Permanente Medical Group (TPMG), and while practicing medicine within the scope of that employment. Respondent is otherwise prohibited from supervising physician assistants and advanced practice nurses.
- 12. <u>OBEY ALL LAWS</u>. Respondent shall obey all federal, state and local laws, all rules governing the practice of medicine in California and remain in full compliance with any court ordered criminal probation, payments, and other orders.
 - 13. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations

under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all the conditions of probation.

Respondent shall submit quarterly declarations not later than 10 calendar days after the end of the preceding quarter.

14. GENERAL PROBATION REQUIREMENTS.

Compliance with Probation Unit

Respondent shall comply with the Board's probation unit.

Address Changes

Respondent shall, at all times, keep the Board informed of Respondent's business and residence addresses, email address (if available), and telephone number. Changes of such addresses shall be immediately communicated in writing to the Board or its designee. Under no circumstances shall a post office box serve as an address of record, except as allowed by Business and Professions Code section 2021(b).

Place of Practice

Respondent shall not engage in the practice of medicine in Respondent's or patient's place of residence, unless the patient resides in a skilled nursing facility or other similar licensed facility.

License Renewal

Respondent shall maintain a current and renewed California physician's and surgeon's license.

Travel or Residence Outside California

Respondent shall immediately inform the Board or its designee, in writing, of travel to any areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty (30) calendar days.

In the event Respondent should leave the State of California to reside or to practice, Respondent shall notify the Board or its designee in writing 30 calendar days prior to the dates of departure and return.

15. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be

available in person upon request for interviews either at Respondent's place of business or at the probation unit office, with or without prior notice throughout the term of probation.

16. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or its designee in writing within 15 calendar days of any periods of non-practice lasting more than 30 calendar days and within 15 calendar days of Respondent's return to practice. Non-practice is defined as any period of time Respondent is not practicing medicine as defined in Business and Professions Code sections 2051 and 2052 for at least 40 hours in a calendar month in direct patient care, clinical activity or teaching, or other activity as approved by the Board. If Respondent resides in California and is considered to be in non-practice, Respondent shall comply with all terms and conditions of probation. All time spent in an intensive training program which has been approved by the Board or its designee shall not be considered non-practice and does not relieve Respondent from complying with all the terms and conditions of probation. Practicing medicine in another state of the United States or Federal jurisdiction while on probation with the medical licensing authority of that state or jurisdiction shall not be considered non-practice. A Board-ordered suspension of practice shall not be considered as a period of non-practice.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete the Federation of State Medical Board's Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment program that meets the criteria of Condition 18 of the current version of the Board's "Manual of Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of medicine.

Respondent's period of non-practice while on probation shall not exceed two (2) years.

Periods of non-practice will not apply to the reduction of the probationary term.

Periods of non-practice for a Respondent residing outside of California will relieve Respondent of the responsibility to comply with the probationary terms and conditions with the exception of this condition and the following terms and conditions of probation: Obey All Laws; General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or Controlled Substances; and Biological Fluid Testing..

- 17. <u>COMPLETION OF PROBATION</u>. Respondent shall comply with all financial obligations (e.g., restitution, probation costs) not later than 120 calendar days prior to the completion of probation. Upon successful completion of probation, Respondent's certificate shall be fully restored.
- 18. <u>VIOLATION OF PROBATION</u>. Failure to fully comply with any term or condition of probation is a violation of probation. If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation, or an Interim Suspension Order is filed against Respondent during probation, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.
- 19. <u>LICENSE SURRENDER</u>. Following the effective date of this Decision, if
 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
 the terms and conditions of probation, Respondent may request to surrender his or her license.

 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
 determining whether or not to grant the request, or to take any other action deemed appropriate
 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
 shall within 15 calendar days deliver Respondent's wallet and wall certificate to the Board or its
 designee and Respondent shall no longer practice medicine. Respondent will no longer be subject
 to the terms and conditions of probation. If Respondent re-applies for a medical license, the
 application shall be treated as a petition for reinstatement of a revoked certificate.
- 20. PROBATION MONITORING COSTS. Respondent shall pay the costs associated with probation monitoring each and every year of probation, as designated by the Board, which may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of California and delivered to the Board or its designee no later than January 31 of each calendar year.

ACCEPTANCE

1	I have carefully read the above Stipulated Settlement and Disciplinary Order and have full
2	discussed it with my attorney, M. Bradley Wishek. I understand the stipulation and the effect it
3	will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated Settlement and
4	Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be bound by the
5	Decision and Order of the Medical Board of California.
6	DATED: 711/19
8	AMANZOOPINDER KAUR SAMRAO, M.D. Respondent
9	I have read and fully discussed with Respondent Amanzoopinder Kaur Samrao, M.D. the
10	terms and conditions and other matters contained in the above Stipulated Settlement and
11	Disciplinary Order. I approve its form and coptent.
12	DATED: 7/11/19 Musselles
13	M. BRADLEY WISHEK Attorney for Respondent
14	
15	<u>ENDORSEMENT</u>
16	The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
17	submitted for consideration by the Medical Board of California.
18 19	DATED: Respectfully submitted,
20	XAVIER BECERRA Attorney General of California
21	STEVEN D. MUNI Supervising Deputy Attorney General
22	Supervising Deputy Attorney General
23	
24	JANNSEN TAN Deputy Attorney General
25	Attorneys for Complainant
26	
27	
28	SA2019101525
- 11	

Éxhibit A

Accusation No. 800-2016-023232

1	XAVIER BECERRA Attorney General of California			
2	Attorney General of California STEVEN D. MUNI Supervising Deputy Attorney General	FILED		
3	JANNSEN TAN Deputy Attorney General	STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA		
4	State Bar No. 237826 1300 I Street, Suite 125	SACRAMENTO CLUCIUST 12 20 19		
5	P.O. Box 944255 Sacramento, CA 94244-2550	BY COLVA 40870 ANALYST		
6	Telephone: (916) 210-7549 Facsimile: (916) 327-2247			
7	Attorneys for Complainant			
8	REFOR	ኮ ጥঘኮ		
9	BEFORE THE MEDICAL BOARD OF CALIFORNIA			
10	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA			
11				
12	In the Matter of the Accusation Against:	Case No. 800-2016-023232		
13	AMANZOOPINDER KAUR SAMRAO,	ACCUSATION		
14	M.D. The Permanente Medical Group			
15	7373 West Lane Stockton, CA 95210-3377			
16 17	Physician's and Surgeon's Certificate No. A 109227,			
18	Respondent.			
19				
20	Complainant alleges:			
21	<u>PARTIES</u>			
22	1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official			
23	capacity as the Executive Director of the Medical Board of California, Department of Consumer			
24	Affairs (Board).			
25	2. On or about August 14, 2009, the Medical Board issued Physician's and Surgeon's			
26	Certificate No. A 109227 to Amanzoopinder Kaur Samrao, M.D. (Respondent). The Physician's			
27	and Surgeon's Certificate No. A109227 was in full force and effect at all times relevant to the			
28	charges brought herein and will expire on April 30, 2021, unless renewed.			

JURISDICTION

- 3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.
 - 4. Section 2227 of the Code states:
- "(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:
 - "(1) Have his or her license revoked upon order of the board.
- "(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.
- "(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.
- "(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.
- "(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.
- "(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board pursuant to Section 803.1."
 - 5. Section 2234 of the Code, states:
- "The board shall take action against any licensee who is charged with unprofessional conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not limited to, the following:

- "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter.
 - "(b) Gross negligence.
- "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or omissions. An initial negligent act or omission followed by a separate and distinct departure from the applicable standard of care shall constitute repeated negligent acts.
- "(1) An initial negligent diagnosis followed by an act or omission medically appropriate for that negligent diagnosis of the patient shall constitute a single negligent act.
- "(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but not limited to, a reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.
 - "(d) Incompetence.
- "(e) The commission of any act involving dishonesty or corruption which is substantially related to the qualifications, functions, or duties of a physician and surgeon.
 - "(f) Any action or conduct which would have warranted the denial of a certificate.
- "(g) The practice of medicine from this state into another state or country without meeting the legal requirements of that state or country for the practice of medicine. Section 2314 shall not apply to this subdivision. This subdivision shall become operative upon the implementation of the proposed registration program described in Section 2052.5.
- "(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and participate in an interview by the board. This subdivision shall only apply to a certificate holder who is the subject of an investigation by the board."
 - 6. Section 2237 of the Code states:
- "(a) The conviction of a charge of violating any federal statutes or regulations or any statute or regulation of this state, regulating dangerous drugs or controlled substances, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such

unprofessional conduct. A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section.

"(b) Discipline may be ordered in accordance with Section 2227 or the Medical Board may order the denial of the license when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment."

7. Section 2239 of the Code states:

"(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.

"(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. The Medical Board may order discipline of the licensee in accordance with Section 2227 or the Medical Board may order the denial of the license when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment."

8. Section 490 of the Code states:

"(a) In addition to any other action that a board is permitted to take against a licensee, a board may suspend or revoke a license on the ground that the licensee has been convicted of a crime, if the crime is substantially related to the qualifications, functions, or duties of the business or profession for which the license was issued.

- "(b) Notwithstanding any other provision of law, a board may exercise any authority to discipline a licensee for conviction of a crime that is independent of the authority granted under subdivision (a) only if the crime is substantially related to the qualifications, functions, or duties of the business or profession for which the licensee's license was issued.
- "(c) A conviction within the meaning of this section means a plea or verdict of guilty or a conviction following a plea of nolo contendere. Any action that a board is permitted to take following the establishment of a conviction may be taken when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code.
- "(d) The Legislature hereby finds and declares that the application of this section has been made unclear by the holding in *Petropoulos* v. *Department of Real Estate* (2006) 142 Cal.App.4th 554, and that the holding in that case has placed a significant number of statutes and regulations in question, resulting in potential harm to the consumers of California from licensees who have been convicted of crimes. Therefore, the Legislature finds and declares that this section establishes an independent basis for a board to impose discipline upon a licensee, and that the amendments to this section made by Senate Bill 797 of the 2007 -08 Regular Session do not constitute a change to, but rather are declaratory of, existing law."

9. Section 492 of the Code states:

"Notwithstanding any other provision of law, successful completion of any diversion program under the Penal Code, or successful completion of an alcohol and drug problem assessment program under Article 5 (commencing with section 23249.50) of Chapter 12 of Division 11 of the Vehicle Code, shall not prohibit any agency established under Division 2 ([Healing Arts] commencing with Section 500) of this code, or any initiative act referred to in that

division, from taking disciplinary action against a licensee or from denying a license for professional misconduct, notwithstanding that evidence of that misconduct may be recorded in a record pertaining to an arrest.

"This section shall not be construed to apply to any drug diversion program operated by any agency established under Division 2 (commencing with Section 500) of this code, or any initiative act referred to in that division."

10. Section 493 of the Code states:

"Notwithstanding any other provision of law, in a proceeding conducted by a board within the department pursuant to law to deny an application for a license or to suspend or revoke a license or otherwise take disciplinary action against a person who holds a license, upon the ground that the applicant or the licensee has been convicted of a crime substantially related to the qualifications, functions, and duties of the licensee in question, the record of conviction of the crime shall be conclusive evidence of the fact that the conviction occurred, but only of that fact, and the board may inquire into the circumstances surrounding the commission of the crime in order to fix the degree of discipline or to determine if the conviction is substantially related to the qualifications, functions, and duties of the licensee in question.

"As used in this section, 'license' includes 'certificate,' 'permit,' 'authority,' and 'registration."

11. Section 802.1 of the Code states:

- (a)(1) A physician and surgeon, osteopathic physician and surgeon, a doctor of podiatric medicine, and a physician assistant shall report either of the following to the entity that issued his or her license:
 - (A) The bringing of an indictment or information charging a felony against the licensee.
- (B) The conviction of the licensee, including any verdict of guilty, or plea of guilty or no contest, of any felony or misdemeanor.
- (2) The report required by this subdivision shall be made in writing within 30 days of the date of the bringing of the indictment or information or of the conviction.

(b) Failure to make a report required by this section shall be a public offens	e punishable by
a fine not to exceed five thousand dollars (\$5,000).	

12. Section 822 of the Code states:

"If a licensing agency determines that its licentiate's ability to practice his or her profession safely is impaired because the licentiate is mentally ill, or physically ill affecting competency, the licensing agency may take action by any one of the following methods:

- "(a) Revoking the licentiate's certificate or license.
- "(b) Suspending the licentiate's right to practice.
- "(c) Placing the licentiate on probation.
- "(d) Taking such other action in relation to the licentiate as the licensing agency in its discretion deems proper.

"The licensing section shall not reinstate a revoked or suspended certificate or license until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's right to practice his or her profession may be safely reinstated."

13. California Code of Regulations, title 16, section 1360, states:

For the purposes of denial, suspension or revocation of a license, certificate or permit pursuant to Division 1.5 (commencing with Section 475) of the code, a crime or act shall be considered to be substantially related to the qualifications, functions or duties of a person holding a license, certificate or permit under the Medical Practice Act if to a substantial degree it evidences present or potential unfitness of a person holding a license, certificate or permit to perform the functions authorized by the license, certificate or permit in a manner consistent with the public health, safety or welfare. Such crimes or acts shall include but not be limited to the following: Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of, or conspiring to violate any provision of the Medical Practice Act.

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FIRST CAUSE FOR DISCIPLINE

(Conviction of Crimes Substantially Related to the Qualifications, Functions, or Duties of Physician and Surgeon)

- 14. Respondent is subject to disciplinary action under sections 2227, 2234, as defined by section 2236, California Code of Regulations, title 16, section 1360, and sections 490 and 493, of the Code, in that Respondent has been convicted of a crime substantially related to the qualifications, functions, duties of a Physician and Surgeon, as more particularly alleged hereinafter:
- 15. On or about May 31, 2016, at approximately 0335 hours, Officer Stamps from the Livermore Police Department (Livermore PD) was dispatched to a report of a non-injury hit and run collision on 523 Heligan Lane crossing Burbank Ave.
- 16. Officer Stamps arrived at the scene at approximately 0337 hours. Officer Keifer and Officer Yost were also at the scene of the collision. At the scene, Officer Stamps located a blue 2002 Ford F150 truck parked on Burbank Avenue, south of Helligan Lane. Officer Stamps observed that the Ford truck had sustained moderate front-end damage consistent with a front-end collision.
- 17. Livermore PD advised Officer Stamps that the Ford Truck was reported to have been bumped by a Toyota sedan which fled from the scene immediately after collision. Officer Stamps conducted an area check and attempted to speak with the registered owner of the Ford Truck. While Officer Stamps was attempting to contact the owner of the Ford Truck, Officer Kiefer noticed a tow truck drive past. Believing the tow truck was possibly responding to the suspect vehicle's location, Officer Yost followed the tow truck driver.
- 18. At approximately 0355 hours, Officer Yost followed the truck to 449 Sumal Commons, and made contact with Respondent, who was the suspected vehicle's driver. Respondent was standing in the open garage of 449 Sumal Common next to the suspect vehicle, a silver 2015 Lexus G350 sedan (Lexus). Officer Yost asked the Respondent if she had been in an accident. Respondent replied, "I hit something." Officer Yost asked if Respondent had hit the Ford Truck. Respondent replied, "Yea, my wrist hurts." Officer Yost proceeded to collect Respondent's paperwork.

- 19. At approximately 0400 hours, Officer Stamps walked to 449 Sumal Common and made contact with Respondent. Officer Stamps observed that Respondent's vehicle had sustained moderate front-end damage, consistent with damage from a front-end collision. The Lexus's airbags had also been deployed.
- 20. Respondent stated she had just returned from a vacation trip to Hawaii. She arrived home and drove the Lexus sedan to a local grocery store. She was on her way back when she collided with the Ford Truck. Respondent stated that she took Xanax and Benadryl "a few hours ago", while she was travelling on the airplane. Respondent subsequently changed her story and said she took the Xanax and Benadryl after the collision. Respondent stated that the Xanax was prescribed to her, but failed to tell Officer Stamps how much she took prior to the collision. Respondent stated that she knew that she was involved in a collision because "all her airbags went off." Respondent stated she was distracted by her cell phone while she was trying to change the music. She believed that this distraction was the cause of the crash. Respondent was contacted by the Lexus' OnStar system (OnStar). Respondent requested a tow truck through OnStar. Respondent did not attempt to contact the owner or leave her insurance information with the Ford Truck.
- 21. Officer Stamps observed that Respondent's eyes were bloodshot and watery and she walked with an unsteady gait. Officer Stamp also observed that Respondent's speech was slow and slurred. Officer Keifer noticed the strong odor of alcohol on Respondent's breath and person. Respondent also leaned against the Lexus as she spoke to Officer Stamps.
- 22. Respondent consented to a Field Sobriety Test (FST). Respondent refused to take a Preliminary Alcohol Screening (PAS) test. She stated that she was on Xanax and did not want to take a "PAS" test because she did not want a "DWI." Respondent added that she still felt the effects of the Xanax.
- 23. Respondent failed the FST and Officer Stamps proceeded to arrest Respondent.

 Officer Stamps told Respondent that she would have to submit to a blood test to determine the drug content of her blood. Officer Stamps took Respondent to Valley Care Hospital (VCH) for medical clearance. Officer Stamps read the DMV DS-267 Chemical Test Refusal form to

Respondent. Respondent refused the blood test. Officer Stamps filled the form, and Officer Kiefer authored a forced blood draw warrant, which was subsequently granted by a judge. The results of the blood draw revealed that Respondent was positive for Xanax at 0.17 mg/L, Diphenhydramine at 0.16 mg/L, Fluoxetine at 0.27 mg/L, Norfluoxetine at 0.18 mg/L and Phentermine at 0.09 mg/L.

- 24. On or about December 1, 2016, a misdemeanor complaint was filed before the Superior Court in Alameda County, in the matter of *The People of the State of California v. Aman K. Samrao*, Case No. 16-CR-015819. Count One charged Respondent with Driving a Vehicle While Under the Influence of an Alcoholic Beverage or Any Drug in violation of Section 23152, subdivision (a), of the Vehicle Code. Count Two charged Respondent with Driving a Vehicle with a Blood Alcohol content of 0.08 percent or more, in violation of Section 23152, subdivision (b), of the Vehicle Code. It was further alleged that Respondent, during the commission of the above offense, refused to take a chemical test.
- 25. On or about May 19, 2017, Respondent pled no contest to Count Two, Driving a Vehicle with a Blood Alcohol content of 0.08 percent or more, in violation of Section 23152, subdivision (b), of the Vehicle Code, a misdemeanor. The Court sentenced Respondent to Probation for three years, serve 10 days in county jail, enroll in a weekend work program, DUI school for three months, fines and fees.'
- 26. On or about May 29, 2018, the Board received a criminal action form from Respondent stating that she reported her May 31, 2016 arrest to the Board during her last renewal but was not aware of the 30-day notice. Respondent failed to report conviction timely to the Board.
- 27. On or about June 7, 2018, at approximately 2130 hours, Officer Stanhope, California Highway Patrol (Officer Stanhope), was on patrol, travelling westbound of I-580, east of Isabel Avenue in #4 lane. He observed a grey Lexus GS350 SUV (Lexus), travelling in the #5 lane ahead of his patrol vehicle, veer to the right into the #6 lane on two occasions. Officer Stanhope passed the Lexus and observed it veer to the right onto the right shoulder. Officer Stanhope

positioned his vehicle behind the Lexus, activated his Code 3 lights and initiated a traffic stop along Airway Blvd., north of I-580.

- 28. Officer Stanhope made contact with the Lexus' driver who rolled down the driver side window. He advised the driver of the Lexus of the reason for the stop. The Lexus' driver identified herself as the Respondent. Officer Stanhope observed the overwhelming smell of perfume emitting from the vehicle. He checked Respondent's eyes to check for signs of intoxication. He observed Respondent was unable to follow his finger. He instructed Respondent to exit the vehicle and meet him on the concrete sidewalk.
- 29. After reaching the sidewalk, Officer Stanhope conducted a license check and discovered that Respondent was on DUI probation. He asked Respondent if she had anything to drink, and she replied that she had drinks approximately 30 minutes earlier.
- 30. At approximately 2215 hours, Officer Stanhope arrested Respondent Driving a Motor Vehicle Under the Influence of Alcohol, a violation of Vehicle Code Section 23152. Respondent was despondent and behaved erratically. Officer Stanhope determined that Respondent was a danger to herself and needed a mental health evaluation. Officer Stanhope administered a PAS test and Respondent blew a .13% and .13% respectively.
- 31. On or about March 11, 2019, a Board Investigator interviewed Respondent involving the May 31, 2016 arrest. During the interview, Respondent informed the Board that she complied with all the terms and conditions of her court sentence despite the June 7, 2018 arrest. She also informed the Board that she did not have concerns with her ability to practice medicine safely.

SECOND CAUSE FOR DISCIPLINE (Use of Alcoholic Beverages and Controlled Substances)

32. Respondent is subject to disciplinary action under sections 2227, 2234, as defined by section 2239 of the Code, in that Respondent used or administered to herself controlled substances, used dangerous drugs, and/or used alcoholic beverages to the extent, or in such a manner as to be dangerous or injurious to herself, or to the public. The facts and circumstances are more particularly alleged hereinafter: Paragraphs 14 through 31, above, are hereby incorporated by reference and re-alleged as if fully set forth herein.

THIRD CAUSE FOR DISCIPLINE

(Impairment Due to a Medical Condition)

33. Respondent is subject to disciplinary action under sections 2227, 2234, as defined by section 822 of the Code, in that Respondent is unable to practice safely due to a medical condition, and permitting her to continue to engage in the practice of medicine at this point in time will endanger the public health, safety, and welfare. The facts and circumstances are more particularly alleged hereinafter: Paragraphs 14 through 31, above, are hereby incorporated by reference and re-alleged as if fully set forth herein.

FOURTH CAUSE FOR DISCIPLINE (Dishonesty)

34. Respondent is subject to disciplinary action under sections 2227, 2234 subdivision e of the Code in that she committed acts of dishonesty or corruption substantially related to the qualifications, functions or duties of a physician and surgeon as more particularly alleged hereinafter: Paragraphs 14 through 31, above, are hereby incorporated by reference and realleged as if fully set forth herein.

<u>FIFTH CAUSE FOR DISCIPLINE</u> (Failure to Report Conviction to the Board)

35. Respondent is subject to disciplinary action under sections 2227, 2234 as defined by section 802.1 of the Code in that in that she failed to disclose her conviction to the Board:

Paragraphs 14 through 31 above, are hereby incorporated by reference and realleged as if fully set forth herein.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

- 1. Revoking or suspending Physician's and Surgeon's Certificate No. A 109227, issued to Amanzoopinder Kaur Samrao, M.D.;
- 2. Revoking, suspending or denying approval of Amanzoopinder Kaur Samrao, M.D.'s authority to supervise physician assistants and advanced practice nurses;